

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>g.a</i>		<i>9/21/99</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>7/10/99</i>	<i>5-23-99</i>
FORMALITY REVIEW			<i>10-12</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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